

# APPLICATION FOR ABSENTEE VOTER BALLOT *(State of Hawaii Registered Voters Only)*

## STATE OF HAWAII

- ☐ County of Hawaii   ☐ County of Kauai  
☐ County of Maui   ☐ City & County of Honolulu

### Office Use Only

Type Code

MM - Military Member  
MD - Military Dependent  
OC - Overseas Civilian

Mail Code

F - Foreign  
C - Con US  
S - State  
L - Local

### Section I. I hereby request Absentee Ballots for the following Election(s):

- ☐ Primary Only   ☐ General Only   ☐ Primary & General

I hereby request ballot instructions in: ☐ Japanese (Oahu)   ☐ Ilocano (Oahu, Maui, and Kauai)

### Section II. Print clearly in black ink. Failure to complete all items will prevent acceptance of this application.

1. SOCIAL SECURITY NUMBER* ____ - ____ - ____		2. DATE OF BIRTH ____ / ____ / ____ Month / Day / Year		3. PLACE OF BIRTH	
4. TELEPHONE Home: _____ Business: _____				5. GENDER <input type="checkbox"/> Male <input type="checkbox"/> Female	
6. LAST NAME		First Name		Middle Initial(s)	
7. RESIDENCE ADDRESS IN HAWAII (Must be completed, P.O. Box, R.R., S.R., are <b>not</b> acceptable)				Apt. No	City/Town
8. MAILING ADDRESS IN HAWAII (Street address or P.O. Box)				City/Town	Zip Code
9. If no street/residence address, describe location of residence (Leave blank if #7 is completed)				City/Town	Zip Code

### Section III. Please mail my ballots to:

PRIMARY

GENERAL (if mailing address is different from PRIMARY)

10. Name	12. Name
11. Forwarding Address (Include Zip Code)	13. Forwarding Address (Include Zip Code)
<input type="checkbox"/> HOLD for arrival	<input type="checkbox"/> HOLD for arrival

**Section IV.** I hereby affirm that: 1) I am the person named above; 2) I am requesting an absentee ballot for myself and no other; and 3) all information furnished on this application is true and correct.

14. Signature or Mark of Applicant (Only signature or mark of applicant is acceptable)	Date
Witness Signature (Required only if applicant makes a mark)	Date
Address of Witness	Phone No. of Witness

**\*Notice:** A Social Security Number is required by HRS §11-15 and HRS §15-4. It is used to prevent fraudulent registration and voting. Failure to furnish this information will prevent acceptance of this application. Pursuant to HRS §11-20, the City/County Clerks may use this application to transfer a voter to the proper precinct to correspond with the address given above, under item 7.

Office Use Only				Application No.		
District/Precinct	Ballot Type	Ballot Stub No.	Ballot Mailed	By	Ballot Received	By
		Primary:				
		General:				
Clerk		OHA:				

Remarks: